
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Michael G. Martinek et al.

Attorney Docket No.: IGT1P369/SH00052-001

Application No.: 09/520,405

Examiner: Frank M. Leiva

Filed: March 8, 2000

Group: 3717

Title: COMPUTERIZED GAMING SYSTEM,
METHOD AND APPARATUS

Confirmation No.: 1300

CERTIFICATE OF EFS-WEB TRANSMISSION

I hereby certify that this correspondence is being transmitted electronically through EFS-WEB to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 on May 4, 2012.

Signed: /Michelle Heymann/
Michelle Heymann

NOTICE OF APPEAL

Mail Stop AF
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Appeals from the decision of the Primary Examiner mailed January 4, 2012, finally rejecting Claims 58-70, 74-76, 78, 79, 81, and 83.

The item(s) checked below are appropriate:

Appeal Fee: ☐ \$310.00 (Small Entity) ☒ \$620.00 (Large Entity)

The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136 apply:

☒ Applicant petitions for an extension of time under 37 C.F.R. §1.136 (fees: 37 C.F.R. §1.17(a)-(d)) for the total number of months checked below:

	<u>Months</u>	<u>Large Entity</u>	<u>Small Entity</u>
<input checked="" type="checkbox"/>	one	\$150.00	\$ 75.00
<input type="checkbox"/>	two	\$560.00	\$280.00
<input type="checkbox"/>	three	\$1,270.00	\$635.00

If an additional extension of time is required, please consider this a petition therefor.

☐ An extension for month(s) has already been secured and the fee paid therefor of \$ is deducted from the total fee due for the total months of extension now requested.

- ☐ Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

Total Fee Due

Notice of Appeal Fee	\$ 620.00
Extension Fee (if any)	\$ 150.00
Credit for prior Notice of Appeal Filed December 22, 2010	(\$540.00)

Total Fee Due \$ 230.00

- ☐ Enclosed is Check No. in the amount of \$.
- ☒ The Commissioner is authorized to charge the required fees, and/or any additional fees or credit any overpayment to Deposit Account No. 504480, (Order No. IGT1P369/SH00052-001).

Respectfully submitted,
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